

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	13	66621	3/15/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	9	4	9 1 3 11
2	2	2	2 13 23 3
3	3	2	2 03 03 03
4	4	1	1 1 1 1
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50	50	1	1 1 1 1

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If more than 150 claims or 10 actions  
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